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## \*\* CONTINUING DATA \*\*\*\*\*

*None. MJS*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None. MJS*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ID	SHEETS DRAWING 5	TOTAL CLAIMS 23	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>John J. Johnson</i> Examiner's Signature	Initials			

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## TITLE

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